

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

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PLAINTIFF Da	fina Roter	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	mires -3 4	9-4-	EASTERN	USTROT W	COURT CASE NUMB	ER		
DEFENDANT Frontier Airlines Inc, et al.			U.S. MAINS MILWAUKEI	Y h	2014 MAR	19 A 8: 1	Order, Complaint, Not	ice, Waiver, Consent		
SERVE	Frontier Airline	NAME OF INDIVIDUAL COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Frontier Airlines Inc c/o CSC-Lawyers Incorporating Service Company								
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)									
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS RELOW:										
Г Dafina Roter							Number of process to b served with this Form -			
	26151 S Wind Lake Rd Racine, WI 53185						Number of parties to be served in this case	;		
L							Check for service on U	.S.A.		
	Available For Service):						and Alternate Addresses. All			
Signature of A	ttorney or other Origin	nator requesting	service on behalf of:				TELEPHONE NUMBE	ER DATE		
D 7 D					_	AINTIFF				
Dafina Rot				DOTTAL		FENDANT		Jan 31, 2014		
		مانتا عضمانه ماستعاده فعادات	OF U.S. MA			O NOT WI S Deputy or Clerk	RITE BELOW	THIS LINE		
9			of Origin to Serve	Signature of	Additionized obtain	5 Deputy of Cicik		3 Fc 6 14		
		J L.					- water and the state of the st			
			served, D have legal evove or on the individua				marks", the process descri	bed on the individual,		
I hereby ce	rtify and return that I	am unable to lo	cate the individual, cor	npany, corporati	on, etc., named a	bove (See remarks	below)			
Name and title	of individual served (if not shown ab	ove)					ble age and discretion he defendant's usual		
Address (complete only if different than shown above)							Date of Service	Time am		
							Signature of U.S. Marsi	hal or Deputy		
Service Fee	Total Mileage (harges	Forwarding Fee To	otal Charges T	Advonce	I Amount and	d to U.S. Marshal or	Amount of Defined		
Service Lee	(Including end		To waiting rec 10	otal Charges	Advance Deposits	Amount owe	EU TO O.S. IMAISHAI OF	Amount of Refund		
REMARKS:	3 Feb 14 r	cvd tr	nailed)	- aller			
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1 CLERK OF THE COURT

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PLAINTIFF 2014 FEB - 3 A SULPRINDISTRICT - WI						- 70	COURT CASE NUMBER				
Dafina Roter			LASILO					14-C-71			
DEFENDANT				HARSE	AL			TYPE OF PROCESS			
Frontier Airlines Inc, et al.				AUNEE	·White Mi	\$ 1 <i>)</i>	Order, Complaint, Notice, Waiver, Consent				
SERVE	NAME OF INDIVIDUAL COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TRANSPORTED BY TO SERVE OR DESCRIPTION OF PROPERTY OR DESCRIPTION OF SERVE OR DESCRIPTION OR SERVE OR DESCRIPTION OR SERVE OR DESCRIPTION OR DESCRIPTION OR SERVE OR DESCRIPTION OR SERVE OR DESCRIPTION OR SERVE OR DESCRIPTION OR SERVE O								NDEM	N	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)										
AT 601 East Erie Street, Suite 616 Milwaukee, WI 53202											
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Number of process to be											
								served with this Form			
Dafina Roter 26151 S Wind Lake Rd											
Racine, WI 53185								Number of parties to be served in this case			
L											
								Check for service on U.S.A.			
										<u> </u>	
	TRUCTIONS OR OT Available For Service):	HER INFOR	MATION TH	IAT WILL A	SSIST IN EX	PEDITING SERV	ICE <u>(Include Business</u>	and Alternate Addresses, Ali	l Telepho	me Numbers, and	
Signature of A	ttorney or other Origin	nator request	ing service on	behalf of:		,		TELEPHONE NUMBER DATE		DATE	
						M2 D1	AINTEE				
Dofine Det							AINTIFF				
Dafina Rot	er		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	브만	EFENDANT			Jan 31, 2014	
SPAC	E BELOW F	OR US	E OF U	.S. MA	RSHAL	ONLY - D	O NOT W	RITE BELOW	THI	S LINE	
	e receipt for the total	Total	District	District	Signature o	f Authorized USM	IS Deputy or Clerk		Date	·	
number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)		Process	of Origin	to Serve		- manusament	Management of State Communication (Action Communication Co				
		1 1	No. 22	No. 37					13	F1614	
		<u></u>	INU. E.L.	I No	22.00.00		and a market and a				
	y and return that I \Box horation, etc., at the ad							emarks", the process descrinserted below.	ibed on	the individual,	
	ertify and return that I			dividual, con	npany, corpora	tion, etc., named	above (See remarks	below)			
Name and title of individual served (if not shown above) A person of suitable age and discretion									e and discretion		
								then residing in the defendant's usual place of abode.			
Address (comp	olete only if different t	han shown a	bove)					Date of Service	Tim	e am	
										pm	
							Signature of U.S. Marshal or Deputy				
Service Fee	Total Mileage ((Including end	~	Forwardin	ig Fee To	otal Charges	Advance Deposits	Amount owe	ed to U.S. Marshal or	Ar	nount of Refund	
REMARKS:	2 E/1 /U	reved	+mail	id			-				
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